



PLUMBING PERMIT APPLICATION

FOR 4 OR MORE FAMILY RESIDENTIAL AND COMMERCIAL

TYPE OR PRINT ALL INFORMATION

Date _____

☐ 4 (OR MORE) FAMILY RESIDENTIAL (# OF DWELLING UNITS = _____)

☐ COMMERCIAL

☐ MULTIPLE PERMIT APPLICATIONS SUBMITTED

(Consideration for the assessment of a single \$30.00 Application Verification Fee will only be made to applications submitted for the SAME ADDRESS at the SAME TIME. This fee will be assessed to the first permit request processed.)

APPLICATION # _____ OF _____

(Please indicate the total number of applications being submitted for the SAME ADDRESS at the SAME TIME. Ex: Application #1 of 3; Application #2 of 3; etc.)

TYPE OF PERMIT ☐ New Construction

Bldg Permit # _____

☐ Alter Existing☐ Addition to Building

ADDRESS OF JOB _____ City _____ Zip Code _____

Working In Unit(s) # _____ TAX DISTRICT/PARCEL # _____

Tenant Name(s) _____ Telephone (____) _____

CONTRACTOR _____ Telephone (____) _____ FAX (____) _____

Address _____ City/State _____ Zip Code _____

License # _____

SIGNATURE OF LICENSED CONTRACTOR OR AUTHORIZED SIGNER _____

PRINT OR TYPE NAME _____

PROPERTY OWNER OF RECORD _____ Telephone (____) _____ FAX (____) _____

Address _____ City/State _____ Zip Code _____

SIGNATURE OF OWNER _____

PRINT OR TYPE NAME _____

SOFT ACCOUNT # _____

AUTHORIZED SIGNATURE OF ACCOUNT _____

COMMERCIAL AND 4 OR MORE FAMILY

TYPE	Sq. Ft. of Coverage (round up to the next 1,000)	Per 1,000 sq. Ft. or portion thereof, of coverage area		Multiplier		Base Fee		Application Verification Fee	Total
New Construction, additions and alterations up to 5,000 sq. ft.	÷ 1000	=	X	\$120.00	+	\$55.00	+ \$30.00	=	
6,000 to 49,000 sq. ft.	÷ 1000	=	X	\$60.00	+	\$55.00	+ \$30.00	=	
50,000sq. ft. and over	÷ 1000	=	X	\$20.00	+	\$55.00	+ \$30.00	=	
Hot Water Heater			# of hot water heaters		X	\$35.00	No application verification fee	=	
Underground Installation fee (Phase I- Foundation)					\$300.00		+ \$30.00	=	
Other: _____								TOTAL FEE	=
ALL FEES ARE NON-REFUNDABLE									

OFFICE USE ONLY

ALL FEES ARE NON-REFUNDABLE

Total Fee _____ Receipt # _____